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Crawley Urban District Council

ANNUAL REPORT

OF THE



MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1962

SEVENTH

ANNUAL REPORT

OF THE PUBLIC HEALTH DEPARTMENT

of

CRAWLEY URBAN DISTRICT

of

WEST SUSSEX

1962

K.N. Mawson, M.B., Ch.B., D.P.H., F.R.S.H.

Medical Officer of Health.

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Chief Public Health Inspector.

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Members of the Public Health Committee

Mr. A.E. Crane (Chairman)
Mrs. C. Harmon (Vice-Chairman)
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Mr. R. Keating
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Mr. R. May
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Mr. F.W.J. Pegler
Mr. J. Tydeman
Mr. J. Young

CRAWLEY URBAN DISTRICT COUNCIL

July, 1963.

Health Department,
Goffs Park House,
Crawley.

To the: Chairman and Members of the
Crawley Urban District Council

Ladies and Gentlemen,

I have the honour to submit to you the Annual Report for 1962, in which an account is given of the work of the Public Health Department during the year. This is the seventh Report since the Urban District was formed in April, 1956, and it has been prepared in accordance with Ministry of Health Circular No. 1/63.

Vital Statistics

On page 10 will be found extracts from the Vital Statistics for the year.

The Registrar-General's estimate of population for mid-1962 is 55,360 - an increase of 1,500 on the mid-1961 figure. As details of births and deaths are passed each month to the Crawley Executive of the New Towns Commission, an accurate estimate of population can be obtained from this source at any time, and I am told that the figure for the end of the year was 57,400.

The total births during 1962 were 1,208 as compared with 1,277 in 1961, giving a crude birth rate of 21.82, still well above the national average. The total deaths rose slightly from 285 to 298, giving a crude death rate of 5.38, far below the average figure for England and Wales.

It will be seen that some 14 deaths were certified as being due to cancer of the lung or bronchus. Since the Crawley Urban District was formed in April 1956, there have been over 90 deaths among residents of the New Town from this cause. So long as the cigarette manufacturers are permitted to spend over £2,000,000 a year on advertising, aimed particularly at youth, the steady rise in deaths from this distressing and largely unnecessary cause will continue with ever-increasing momentum.

Notifiable Diseases

The total notifications received during 1962 were only 98, - an exceptionally low figure which was mainly accounted for by the fact that this was not a "Measles Year".

The 60 cases of Sonne Dysentery mainly occurred early in the year. On December 27th, 1961, I had been informed by the M.O.H. of Southwark that a family from his area, having visited friends living in Tilgate, had contracted Dysentery on December 11th, two days after their return. Specimens were obtained from the family in Tilgate and one child was found to be carrying *Shigella sonnei*. During the course of our routine enquiries we were told of three other families living in the same road who had complained of similar symptoms, although medical advice had not been sought, and bacteriological investigation brought to light a further 12 cases. Fortunately this occurred during the school holidays and precautionary measures were therefore facilitated.

A second outbreak, commencing early in March, was of unusual interest. It is generally accepted that personal contact is the most important means of spread of this disease and it is for this reason that outbreaks are particularly common in Nurseries and in Infant Schools. However, when 13 positive reports had been received from the West Green area, where six families were involved, it was obvious that the outbreak was not following the usual pattern. Among the first 11 cases there were only two school children, both attending the Ifield Grammar School, and two toddlers, who were not known to have contacts outside the home. It was therefore decided to make careful enquiries in each case regarding the source of food, although the dissemination of Sonne Dysentery by means of food or water is a very rare occurrence. The mother of one of the early cases was herself found to be a symptomless carrier and she was working at the time at a grocery store, where her duties included the preparation and wrapping of orders for delivery. It was then established that all the families involved purchased groceries from this establishment. A survey was therefore made of the whole staff, - all of whom were co-operative in producing specimens for bacteriological examination, - and two other women engaged in similar work were found to be excreting the same organism. Obviously it was essential that they should discontinue work at once and notices were served under Section 41 of the Public Health Act, 1961. Fortunately all three cleared fairly quickly. In all, fourteen families are known to have been involved (11 in West Green and 3 in Southgate), among whom 35 individuals had positive laboratory findings.

Section 41 of the Public Health Act, 1961, deals with the matter of compensation for stopping employment to prevent the spread of disease. The M.O.H. may, by notice in writing, request any person to discontinue his work with a view to preventing the spread of a notifiable disease or a disease to which Section 23(1) of the Food and Drugs Act, 1955 applies, i.e. enteric, typhoid or paratyphoid fevers, dysentery, diphtheria, acute inflammation of the throat, gastro-enteritis, undulant fever, or any other disease to which the Section applies by order. The Local Authority must compensate such

a person for any loss he suffers in complying with the request. The value of this Section is clearly demonstrated by the above incident, for had the source not been detected early, or had action under the Section not been taken, in all probability an extensive outbreak over a wide area would have resulted.

SALMONELLA FOOD POISONING

Since 1956 - a peak year, when 8,961 total incidents of Food Poisoning were reported in England and Wales, of which 58% were due to salmonellae - there has been a steady but slow fall in the annual numbers. However the most striking feature throughout the past decade has been the enormous number of "sporadic" cases, when it has been impossible to pin down the source of infection. For each and every "outbreak", there have been approximately 50 isolated incidents, and only too often all efforts by the staff of the Public Health Department prove fruitless. In 1962 an eminent authority remarked that "one of the failures of public health practice at the present time is to investigate salmonellosis adequately." One of the difficulties in this matter arises from the relatively mild nature of many attacks, as a result of which full investigation of a case of "gastro-enteritis" may not be undertaken. Often enough, should a correct diagnosis not be made, no great harm is done, particularly if the sufferer is careful in matters of personal hygiene. However the picture is very different if the patient is a food-handler, whether employed in a restaurant, a canteen, or even in the home.

The second difficulty results from the many different foodstuffs and other materials which are liable to infection. The list includes spray-dried egg from America; Chinese, Australian, and other crystalline and liquid egg albumen and liquid whole egg; dessicated coconut from Ceylon; bone meal and fish meal from Central Africa and the Middle East; dried blood and many types of meat, particularly pork. Many abattoirs, pig farms and bakeries are hot-beds of infection, and only too often this infection is conveyed by cakes, trifles, custards, milk and milk products, cream buns, cooked meats, meat pies, sausage rolls, etc.

The various strains of salmonellae now run to many hundreds, but perhaps the most serious of these is *Salmonella paratyphoid B*, the usual cause of paratyphoid fever. Many outbreaks of this disease have been traced to the use of unpasteurised egg by the bakery trade; - it will be remembered that we had such an outbreak here in Crawley in 1959, when some dozen cases occurred among local children, while others were notified further afield. The recent announcement by the Minister of Health, that he is now considering steps to ensure that all liquid egg products imported into this country will be pasteurised before use, will be welcomed by all public health workers.

One source of salmonella infection calls for special mention. A

survey in 1962 showed that 27% of raw horse meat, 16% of other meat, 12% of prepared pet meat, and 13% of garden fertilisers were found to contain salmonellae. Although a potential source of infection, garden fertilisers such as dried blood, hoof and horse meal, and bone meal, probably involve but a small risk, though it is inadvisable that they should be sold in shops which retail food for human consumption. Pet meat is a more serious hazard, for the housewife who handles such material may use the same utensils or knives for human food later on. Similarly only too often the meat for pets may be prepared in the kitchen, on the same draining board or table as for household food. Certainly the risk which such a practice involves is not generally appreciated.

The difficulties which are so frequently encountered during "food poisoning" enquiries were well exemplified by an incident in this area in 1962. During June and July, five single cases of *Salmonella typhimurium* infection and one "family outbreak" affecting three children, came to light in Horsham and Crawley. Three of the single cases which occurred in Horsham showed the same time of onset, and gave a history of having eaten "cream buns" which came from a bakery in Crawley. In the light of our earlier experience, enquiries were made at the bakery concerned regarding the type of egg used in manufacture, but we were assured that this was pasteurised frozen egg, - the firm having specified this in their contract with the suppliers.

However during September a further four cases were reported in Crawley and four in Horsham, all due to *Salmonella typhimurium* of an unusual type, and in seven of these cases there was a history of having eaten cream buns or cream-filled sponges from the same source - the bakery in Crawley. This new strain of organism had first been detected in February, 1962, at the port of entry, during routine bacteriological examination of frozen egg from Australia. Enquiries were immediately made from other Health Departments over a wide area and similar cases could be linked at Horley, Oxted, Hassocks, and Brighton. Armed with this information we were able to satisfy ourselves that the source of infection was in fact the bakery referred to above, and it was established that the egg supplies were unpasteurised. It was clear that the fault in the matter lay with the suppliers of the frozen egg and not with the bakery. Immediate steps were taken to ensure that all future supplies of egg were heat-treated, while the remaining tins were submitted for bacteriological examination. In due course a report was received from the Central Public Health Laboratory at Colindale, which showed that salmonellae had been isolated from three of these tins and that one of the several varieties was of the same type which had caused the outbreak.

A full bacteriological survey was undertaken at the bakery, including specimens from members of the staff. All but one proved

negative, but this came from a man working in the cake line, who was intimately concerned in the handling of cream buns. He was immediately suspended from work and not permitted to resume until three successive specimens proved negative.

Control of Tuberculosis

In my Annual Report for 1956 - the first such report issued after the formation of the Crawley Urban District in April of that year - I wrote as follows:-

"A study of Tuberculosis over the last century and more gives some grounds for optimism. While there are many human afflictions which cannot be prevented because too little is known of their causation, the conquest of the last of the great infective scourges of the nineteenth century - tuberculosis - is becoming ever more probable. There can be no question that a great epidemic wave of the disease spread over England and Wales in the eighteenth century, reaching its peak in the early years of the nineteenth, and this high incidence can safely be attributed to the deterioration in living conditions which arose during the Industrial Revolution. Flocking from the country to the towns, the great mass of the people lived in squalid and overcrowded dwellings, passing their long hours of work in dark and insanitary factories. Contact was close and infection could pass easily, while the move to urban surroundings was only too often accompanied by a lowering in nutritional standards. Similar dangers arose for the natives of West Africa who came to work in the great ports of Bristol and Cardiff, and their more recent counterparts, the tuberculin-negative Irish immigrants who move to London and the industrial Midlands.

While the association between tuberculosis and overcrowding has been proved beyond doubt, poverty has been shown to be an even more important factor. As a slow improvement in housing and general conditions proceeded in the closing years of the last century, the incidence of infection declined and this fall has since continued.

One encouraging feature has been the marked fall during recent years in bovine infection, of which the most reliable indication is given by the numbers of deaths from abdominal tuberculosis in children under five, since the majority of these were believed to have acquired their disease from infected milk. Between 1921 and 1953, the death rate per million in the London area fell from 136 to 4, in urban districts from 336 to 1 and in rural areas from 252 to 12. Here the most important factor has been the extension in heat-treatment of milk and now between 80 and 90% of the population reside in areas where only specially designated milk is sold. A recent survey of school-leavers in Crawley showed that 16% of the children were tuberculin-positive, while we are finding that the figure for West Sussex children generally is nearly 30%. With the recent extension of the areas in which raw milk may not be retailed, the latter figure will "

"steadily drop. Certainly the marked difference in these findings is attributable to the fact that many Sussex children were drinking raw milk in their earlier years.

Now, the detection of recently infected persons, as revealed by the tuberculin test, and the tracing of the source of their infection, becomes a matter of vital importance. It is hoped that in this area in the near future the testing of all school entrants will be possible. In the majority of cases in this age group the finding of a positive reaction indicates a human infection, usually from someone in the family circle, and it is a most valuable method of ascertainment.

With the prohibition on the sale of unsafe milk, the provision of a good standard of housing for the people, of modern schools for the children and good working conditions for their parents, together with modern methods of ascertainment such as Mass X-ray and tuberculin-testing, it is reasonable to hope that the incidence of this disease in the New Town will be at a low level.

Taking the country as a whole the notification rate has not fallen so steeply as the death rate, but it must be remembered that more thorough ascertainment, including the detection by Mass X-ray of the early case, contributes to the former. Hand-in-hand with preventive measures, the curative services have developed greatly improved methods of treatment. The use of modern antibiotics and chemical drugs, and the great advances in thoracic surgery which have been made particularly in the last decade, together lead to a very different outlook for the person who is told that he is suffering from tuberculosis. Where before he could only look forward to years of invalidism with but a poor chance of survival, the early case can now, owing to modern methods, be given a good hope of effective treatment and permanent cure."

Although it is only six years since the above was written, the incidence of primary infection in childhood has shown a marked fall during this time. The proportion of older children in Crawley found to be tuberculin-positive during testing in connection with the County Council's B.C.G. campaign, has now dropped from 16% to below 8%. The figure given by the Principal School Medical Officer for West Sussex generally is now below 10%.

This finding, of course, emphasises the importance of the B.C.G. vaccination scheme. While I am glad to say that the response from parents in Crawley has been encouraging, there are still some who fail to appreciate the reasons for such protection. Certainly the time has not yet come when there can be any slackening of effort in this campaign, in the early ascertainment of cases - where the Mass Radiography Service plays such an important part - nor in the segregation of those found to be in an infectious state. This point is clearly demonstrated by an occurrence at a primary school in Crawley during the autumn of 1962, on

which I reported to the County Medical Officer of Health at the end of the year as follows:-

"On November 7th a notification was received that a girl of 11 years had been admitted to hospital with a tuberculous pleural effusion. Her home contacts had already been examined at the Chest Clinic, but the findings were negative. There was a history of an attack of Erythema Nodosum (a condition characterised by the appearance of painful node-like swellings on the limbs, particularly over the shins) about the end of August. As it is recognised that this condition may indicate a recent tuberculous infection, it was felt likely that the child had been infected during the summer months, so it was decided to carry out full investigations at the school in an endeavour to trace the source. The patient was a pupil at a Junior School in Crawley, having 470 children on the roll, and as a first step skin-testing of her class was carried out. The percentage of positive reactions among school children is steadily falling and one would not now expect more than five per cent. in this age-group in the New Town, to give a positive reaction. However of the 31 children given a Mantoux test, 16 showed positive readings, while in the vast majority the marked intensity of the reaction suggested recent infection.

Three days later the mobile M.R. Unit visited the school to X-ray all children found positive and also to examine 14 teachers and 14 other staff. Five of the 15 children filmed showed changes suggestive of primary infection, while several others had indefinite shadowing. Only one of the adults showed abnormal appearances in the chest film and this was the teacher of the class involved, who had a history of a troublesome cough during the spring and early summer. Although the film did not confirm tuberculosis it did show an abnormal shadow, so the patient was referred immediately for further investigation to the Chest Clinic, whence she was sent as an in-patient to Redhill Hospital on the following day. Tuberculosis was diagnosed, - and later confirmed by the findings of tubercle bacilli on two occasions. Arrangements were made for all children in the class who were found to be positive reactors to be examined at the Chest Clinic and in most cases chemotherapeutic treatment was advised. One has been notified as a case of Primary Infection. Among those examined was a small girl of 11 years, first seen at the Clinic on December 9th when a further X-ray was normal, who later developed chest pain and was then found to have a pleural effusion on December 22nd.

In view of these somewhat alarming findings, the parents of all other children at the school were asked to agree to skin-testing. The response was most gratifying, as only one parent refused. On December 11th a further 391 children from the remaining classes were subjected to the Mantoux test, but on this occasion the results were altogether different. It was only necessary to refer for M.R. examination a total of 17 children. Of these 6 were known to have had B.C.G. previously, while 2 were known contacts in their homes. Of the remaining 9 reactors,"

"only 2 were classed as "strong positives". This finding, of course, gives further confirmation that the source of infection had been detected. As there is normally a delay of up to two months after infection before the development of sensitivity to a skin-test, arrangements have been made to re-test all children so far negative during February, when B.C.G. will be offered to all negative reactors and any "convertors" will be re-X-rayed.

I would like to express my appreciation of the whole-hearted co-operation of the Headmistress and her staff, without whose help this survey could not have been completed so expeditiously."

International Certificates of Vaccination

Persons travelling abroad to countries which require International Certificates of Vaccination against Smallpox and Cholera must have these signed by the practitioner who carries out the vaccination, and the form must later be stamped at the Public Health Department of the area in which the doctor resides. The object of this procedure is to "authenticate" the signature. During 1962 a total of 2,565 forms were dealt with at Goffs Park House. The number during the year was greater than normal, as certain European countries for a short period required such certificates in the case of holiday-makers from this country, following the occurrence of Smallpox in England and Wales.

Care of the Aged

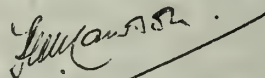
Once again it was not necessary to take action under Section 47 of the National Assistance Act, 1948. This is the section which deals with the compulsory removal from their homes of elderly and infirm persons living in insanitary conditions.

I would like to express my thanks to Mr. T. Steel, the Chief Public Health Inspector, and to his staff for their help and co-operation during the year and also in connection with the preparation of this Report, which was typed by my secretary.

May I take this opportunity of expressing my appreciation of the support I have received from the Chairman and Members of the Public Health Committee.

I am, Ladies and Gentlemen,

Your obedient Servant,



Medical Officer of Health.

Staff of the Public Health Department

Kenneth N. Mawson, M.B., Ch.B., D.P.H., F.R.S.H.
Medical Officer of Health; also Assistant County Medical Officer and School M.O. to the West Sussex County Council, and M.O.H. to N.E. Combined Sanitary District of W. Sussex.

T. Steel, M.A.P.H.I., M.R.S.H., Chief Public Health Inspector

Certificate of the Royal Sanitary Institute and Sanitary Inspectors Joint Board.

Certificate of the Royal Sanitary Institute for Inspectors of Meat and Other Foods.

K.J. Tyler, M.A.P.H.I., M.R.S.H., Deputy Chief Public Health Inspector (To 31st August, 1962)

Certificate of the Royal Sanitary Institute and Sanitary Inspectors Joint Board.

Certificate of the Royal Sanitary Institute for Inspectors of Meat and Other Foods.

G.A. Faulkner, M.A.P.H.I., M.R.S.H., Deputy Chief Public Health Inspector (From 1st October, 1962)

Certificate of the Royal Sanitary Institute and Sanitary Inspectors Joint Board.

Certificate of the Royal Sanitary Institute for Inspectors of Meat and Other Foods.

Smoke Inspector's Certificate of the Royal Society of Health.

L.P. Poole, M.A.P.H.I., M.R.S.H., Additional Public Health Inspector

Certificate of the Royal Sanitary Institute and Sanitary Inspectors Joint Board.

Certificate of the Royal Sanitary Institute for Inspectors of Meat and Other Foods.

D.W. Townsend, M.A.P.H.I., Additional Public Health Inspector

Certificate of the Royal Sanitary Institute and Sanitary Inspectors Joint Board.

Certificate of the Royal Sanitary Institute for Inspectors of Meat and Other Foods.

Smoke Inspector's Certificate of the Royal Society of Health.

Diploma in Bacteriology

Clerks - Mrs. J. Russell and Miss G. Weston.

Secretary to M.O.H. - Miss M. Heydon.

CRAWLEY URBAN DISTRICT COUNCILStatistics & Social Conditions of the Area 1962

Area (Acres)	..	..	..	..	..	5,622
Estimated resident population, mid-1962	..	..				55,360
Number of houses in assessment (31st December, 1962)						
according to the Rate Books	..	..	..			16,200
Rateable Value (31st December, 1962)	..	..				£1,120,546
Sum represented by a Penny Rate (estimated)	..					£4,625

EXTRACTS FROM VITAL STATISTICS OF THE YEAR

	Total	M.	F.	
Live Births (Legitimate	1178	583	595	) Birth Rate = 21.82
(Illegitimate	30	19	11	) per 1,000 estimated
				resident population
				in mid-1962.
Still Births (all legitimate)	21	9	12	) Rate per 1,000 total
				births = 17.38
Deaths	298			Crude Death Rate = 5.38
England & Wales Birth Rate	18.0			Death Rate = 11.9
Birth Rate corrected by Comparability Factor				= 15.05
Death Rate corrected by Comparability Factor				= 11.84
West Sussex Urban Districts Birth Rate				= 14.8
Death Rate				= 14.9
Deaths from Puerperal Causes: (Deaths from Pregnancy, Childbirth and				
Abortion)				= 0

During the year, 5 male and 14 female infants died before a year.

All but one were legitimate infants.

Death Rate of Infants under 1 year of age:-

All Infants per 1,000 Live Births	15.73
Legitimate Infants per 1,000 Legitimate Live Births	15.28
Illegitimate Infants per 1,000 Illegitimate Live Births	33.33
(Infant Mortality Rate for England and Wales	21.4)
Of the above 19 infant deaths, sixteen (4 male and 12 female)	
occurred in the first month, all dying within 7 days of birth.	
Neonatal I.M.R.	13.24

Extracts from Vital Statistics (Continued)

Deaths from Cancer (all ages)	54	(67)
Deaths from Measles (all ages)	0	(0)
Deaths from Whooping Cough (all ages)	0	(0)

(The figures in brackets refer to 1961)

CAUSES OF DEATH IN THE CRAWLEY URBAN DISTRICT

	<u>Males</u>	<u>Females</u>
1. Tuberculosis, respiratory	1 (1)	0 (0)
2. Tuberculosis, other	0 (0)	0 (0)
3. Syphilitic disease	0 (0)	0 (0)
4. Diphtheria	0 (0)	0 (0)
5. Whooping Cough	0 (0)	0 (0)
6. Meningococcal infections	0 (0)	0 (0)
7. Acute poliomyelitis	0 (0)	0 (0)
8. Measles	0 (0)	0 (0)
9. Other infective and parasitic diseases	1 (1)	0 (0)
10. Malignant neoplasm, stomach	2 (7)	1 (2)
11. Malignant neoplasm, lung, bronchus	13 (11)	1 (2)
12. Malignant neoplasm, breast	0 (0)	10 (5)
13. Malignant neoplasm, uterus	0 (0)	3 (2)
14. Other malignant & lymphatic neoplasms	13 (17)	11 (21)
15. Leukaemia, aleukaemia	3 (0)	1 (2)
16. Diabetes	1 (0)	0 (0)
17. Vascular lesions of nervous system	11 (11)	11 (21)
18. Coronary disease, angina	35 (30)	16 (15)
19. Hypertension with heart disease	2 (2)	1 (5)
20. Other heart disease	13 (12)	22 (13)
21. Other circulatory disease	8 (6)	13 (3)
22. Influenza	0 (0)	1 (1)
23. Pneumonia	15 (9)	13 (15)
24. Bronchitis	8 (11)	1 (6)
25. Other diseases of respiratory system	2 (3)	0 (1)
26. Ulcer of stomach and duodenum	2 (0)	1 (0)
27. Gastritis, enteritis and diarrhoea	2 (0)	2 (0)
28. Nephritis and nephrosis	2 (0)	1 (0)
29. Hyperplasia of prostate	1 (0)	0 (0)
30. Pregnancy, childbirth and abortion	0 (0)	0 (0)
31. Congenital malformations	3 (2)	2 (2)
32. Other defined and ill-defined diseases	11 (13)	19 (18)
33. Motor vehicle accidents	3 (1)	2 (1)
34. All other accidents	2 (6)	4 (2)
35. Suicide	5 (3)	2 (2)
36. Homicide and operations of war	1 (0)	0 (0)
	<u>160(146)</u>	<u>138(139)</u>

SOCIAL CONDITIONS

Situated between the Forest Ridge and the Weald in pleasant country, Crawley was for long a market town and shopping centre for the surrounding rural districts. Its recorded history dates back to Norman times. In the middle of the eighteenth century the London to Brighton Road, passing through the town, became one of the most frequented highways in Britain and the George Inn became a famous coaching house.

In 1947 it was decided that Crawley, with the surrounding area, should be expanded into one of the eight New Towns which it was planned to build in a ring approximately 25-30 miles from the centre of London. Crawley can now claim the distinction of being the first of these to reach the stage of completion. Whereas the designated area of the town housed only 9,500 people in 1947, the present population is over 57,000. Thus nearly 48,000 people, mainly from the metropolis, have moved to new surroundings where they enjoy a high standard of living and have established a settled community. Covering 6,000 acres, the town is approximately $3\frac{1}{2}$ miles across and is surrounded by a green belt with ready access to the countryside. The Crawley Development Corporation was responsible for the planning and building of the town, including the majority of houses, most shops and some factories, but the administration of the area is in the hands of the local authorities - the West Sussex County Council and the Crawley Urban District Council.

The town was planned to have nine residential areas, with populations varying from 4,600 to 8,250, a Town Centre and an Industrial Area, the last being situated to the north of the town on the London side, adjoining the main road and railway. Each residential area is largely self-contained, having a Primary School, shops which provide for daily needs, a Church and a Public House. This arrangement cuts to a minimum the distance which children are obliged to walk to school in their early years. A tenth Neighbourhood is now in course of development. As Education Authority the West Sussex County Council has provided Primary, Secondary Modern and Grammar Schools, and a flourishing College of Further Education has been established serving a wide area.

One permanent Community Centre adjoins the West Green Primary School, and two further buildings are under construction. Eight semi-permanent Community Huts have been built in the Neighbourhoods and two Youth Huts are provided. The list of organisations shown in the booklet of local information, - the final edition of which was issued by the Crawley Development Corporation in May, 1961, - totals approximately 450, including Tenants' Associations, Sports Clubs, Social Clubs, Church Clubs and many other organisations.

The number of dwellings which were erected by the Crawley Development Corporation and the New Towns Commission (Crawley Executive) totals

10,980, including both houses and flats.

There is a wide variation in the size and type of accommodation provided, with over 250 types of dwelling, and the average density is 12.3 to the acre. At the end of 1961 the Crawley Urban District Council had 958 properties in occupation.

The vast majority of the residents work in Crawley, either in factories or in the town's services. Seventy-nine factories are in production and two in course of erection, while some eight extensions to existing factories are under way. Unemployment remains at a very low level. The total number at work in the town at the close of the year was 30,700.

The policy adopted by the Crawley Development Corporation was to provide a limited number of shops in the Neighbourhood Centres, 125 in all, a larger number being in the more distant areas. The Town Centre has become a shopping area of regional importance, having over 150 new shops trading. This figure includes department stores, banks, gas and electricity showrooms, etc.

NOTIFIABLE DISEASES

The following cases were notified during 1962. The figures in brackets indicate the number of cases notified the previous year.

Scarlet Fever	2	(22)
Whooping Cough	1	(19)
Measles	13	(2110)
Food Poisoning	5	(3)
Puerperal Pyrexia	13	(2)
Dysentery	60	(38)
Pneumonia	4	(1)
Erysipelas	0	(1)

TUBERCULOSIS

Number of cases added to the Register during the year - 29
(37 in 1961)

(Of this number 13 were new cases, the remainder being "transfers" when the patient moved to Crawley).

Pulmonary Males	14	Non-Pulmonary Males	2
Pulmonary Females	11	Non-Pulmonary Females	2

Number of cases of tuberculosis on the Register at 31st December,
1962 - 299.

VACCINATION AND IMMUNISATION

I am indebted to Dr. Galloway, the County Medical Officer, for the following tables:-

Vaccination and Immunisation Statistics for Year Ended 31st December, 1962.

DIPHTHERIA IMMUNISATION Children born

DIPHTHERIA	1962	1961	1960	1959	1958	1953- 1957	1948- 1952	TOTAL
Primary						4	5	9
Reinforcing						74	50	124
DIPHTHERIA/WHOOPING COUGH								
Primary						2		2
Reinforcing						3		3
DIPHTHERIA/TETANUS								
Primary		1			3	13	10	27
Reinforcing			4	3	4	260	64	335
TRIPLE ANTIGEN								
Primary	415	384	54	19	10	15	2	899
Reinforcing		212	206	56	9	153	9	645
WHOOPING COUGH								
Primary								
Reinforcing								

Vaccination and Immunisation (Continued)

POLIOMYELITIS VACCINATION - Persons born in

1962	1943-1961	1943-1961	1950-1957	1933-1942		OTHERS	
Two Salk Three Oral	Two Salk Three Oral	Third Reinforc.	Fourth Reinforc.	Two Salk Three Oral	Third Reinforc.	Two Salk Three Oral	Third Reinforc.
139	1172	1753	2152	202	468	186	942

SMALLPOX VACCINATION

	Under 1 Year	1 Year	2-4 Years	5-14 Years	Over 14 Years	TOTAL
PRIMARY	909	136	240	1101	1404	3790
REVACCINATION			68	1299	3334	4701

SANITARY CIRCUMSTANCES OF THE AREA

by the Chief Public Health Inspector, Mr. T. Steel

With the town now having become a settled community, the only "peculiarity" of a New Town worth noting is that of the readiness of residents to draw attention to any falling-off in the high standards of environmental hygiene which it has been possible to attain. It is noticeable that most residents are keenly appreciative of these standards and are anxious for them to be maintained.

I would draw particular attention to the section on Food Hygiene and the willing co-operation of employers and employees in connection with the courses of instruction arranged in conjunction with the Principal of Crawley College, whose willing help is greatly appreciated.

The number of complaints received concerning perishable foodstuffs being out of condition was again rather disappointing, and investigations nearly always revealed that complaint was not made to this Department unless the customer had not received satisfaction from the handling of previous complaints made direct to the retailer. It is apparent that a good proportion of food traders would find it advantageous to investigate the procedure adopted in the handling of justifiable complaints made by their customers.

The steady progress of the Smoke Control Programme has been maintained and it is encouraging to note that almost half of the acreage of the district will be subject to confirmed Orders by the 1st October, 1963.

Two unexpected changes in staff caused some difficulty in maintaining the work of the Department, and I must express appreciation of the keenness and loyalty of all the staff, past and present, and of the work carried out by them during the year.

TOTAL NUMBER OF INSPECTIONS FOR ALL PURPOSES 7,320

WATER SUPPLY

Apart from occasional complaints of "dirty" water arising from the disturbance of manganese and iron oxides in the mains, the water supply has been satisfactory in both quality and quantity.

Examination of Treated Water (from supply points)

Bacteriological:

No. of Samples Taken	Satisfactory	B. Coli present over 3 per 100 ml.
19	19	-

Chemical:

No. of Samples Taken	Satisfactory	Unsatisfactory
4	4	-

No. of dwellinghouses supplied with mains water direct to the houses	Estimated Population
16,463	57,000

New houses connected to main supply 600
 Number of houses with private supply 7
 Number of sources involved 7
 Bacteriological samples taken from private supplies -
 Number of samples found unsatisfactory -

PRIVATE SWIMMING POOLS

Number of pools 7
 Number of samples taken 17
 Number of samples found unsatisfactory -

PRIVATE SWIMMING POOLS (Continued)

Six of these pools are attached to schools in the town and one is situated at a factory on the industrial site. Four school pools and the factory pool are equipped with automatic filtration and chlorination plants and one school pool is equipped with automatic chlorination plant only. The remaining pool will be equipped with automatic filtration and chlorination plant in 1963.

In addition to the taking of samples for bacteriological examination, periodic checks are made on the adequacy of chlorination by means of the Department's chloroscope.

CHILDREN'S PADDLING POOL

Automatic filtration and chlorination plant is in use for the Council's Paddling Pool in Southgate playing fields, and checks have been made on its operation.

INSPECTIONS, ETC.PUBLIC HEALTH ACT, 1936

Number of notices served under the Public Health Act:-

Formal	19
Informal	48

Number of notices complied with:-

Formal	18
Informal	60

COMPLAINTS

Number of complaints received	
(other than for rats and mice)	79
Inspections	79
Re-inspections	107

The number of complaints shows a considerable decrease against 1961 (113). This reduction, if not merely temporary, may be due to better standards of property maintenance coupled with the continued steady increase in the proportion of owner-occupied dwellings.

MOVEABLE DWELLINGSPublic Health Act, 1936Caravan Sites & Control of Development Act, 1960.

Inspections	21
Number of notices served	-
Number of moveable dwellings previously licensed under Public Health Act ..	-

MOVEABLE DWELLINGS (Continued)

Number of site licences issued under
~~Caravan Sites & Control of Development~~
 Act -

The number of caravans in the district remained small and again no exceptional problems were encountered.

SECTION 89, PUBLIC HEALTH ACT, 1936

Power to require sanitary conveniences to be provided at inns, refreshment houses, etc.

No further action under this section was found to be warranted.

INFECTIOUS DISEASES

Total number of visits	2089
Rooms disinfected	-
Number of personal specimens	946

INSECT PESTS

Number of visits in connection with vermin (bed bugs, fleas etc.)	24
Number of rooms treated for verminous insects	9

These figures concern 5 premises as against 14 in 1961.

Wasps

The Department continued to give advice on the destruction of nests, and considerable use was made of the service offering spraying equipment and insecticide at a small charge.

DRAINAGE AND SEWERAGE

Present arrangements for sewage disposal are quite adequate, except in a small area of older development in the town for which plans for re-sewering have been completed and will be put into effect in 1963.

At the end of the year there were only 64 houses with cesspool or other independent means of drainage. The planned extension of existing and proposed sewers will further reduce this figure in the coming years.

At present, cesspools are emptied by the Council as frequently as is necessary, on request by occupiers.

DRAINAGE AND SEWERAGE (Continued)

Number of visits in connection with drainage	255
Houses connected to main drainage	12
Other premises connected to main drainage.	1
Houses provided with flushing cisterns....	-
Privies converted to E.C.'s	-
E.C.'s converted to W.C.'s	-
Drains repaired	9

OFFENSIVE TRADES

Number of premises registered (bone boiling & fat extracting)	1
Number of inspections	5

PREVENTION OF DAMAGE BY PESTS ACT, 1949Rodent Control

Number of complaints received	460
Number of infested premises found as a result of survey	93
Estimated number of rats killed	1,800
Estimated number of mice killed	200
Number of rats picked up after treatment .	110

As previous years' treatment had revealed little or no infestation, it was agreed with officers of the Ministry of Agriculture that no routine treatment of sewers need be undertaken in 1962.

The Council's refuse tip was again remarkably free of infestation, - a fact which can be attributed to continuation of good standards of maintenance, coupled with regular inspection.

FOOD & DRUGS ACT, 1955FOOD HYGIENE

The general standard of cleanliness in food premises remained good but, once again, a disappointing number of complaints was received regarding mouldy foodstuffs. In almost all instances the trouble could be traced to the inadequacy of systems of stock control and much time was spent in explaining to retailers the advantages of a proper system of code dating of perishable food-stuffs and strict adherence to recommended "shelf-life".

FOOD HYGIENE (Continued)

Such systems of stock control are becoming more and more essential as the variety of prepared foodstuffs increases. With the number of different lines which are available today, stocks and turnover of any one are liable to be small. Retailers must, therefore, be prepared to accept comparatively high wastage of some lines during periods of reduced demand.

With the willing help of the Principal of Crawley College, courses of instruction to food-handlers were arranged. The response from employers and the attendances by employees were, on this occasion, most encouraging.

41 food-handlers attended courses of 4 afternoon lectures given at the College and 21 of these received certificates for full attendance.

In addition, no difficulty was experienced in finding 20 to enrol for an evening course of 10 lectures in preparation for the Food Hygiene Certificate of the Royal Institute of Public Health and Hygiene. 14 sat for the qualifying examination, all of whom were successful. Ample demand was forthcoming for a further course to be arranged to commence in January 1963 and it is hoped that these arrangements can be repeated annually.

LEGAL PROCEEDINGS

Reports were made to the Public Health Committee of twenty-nine matters in respect of possible infringements of the Food and Drugs Act and the Food Hygiene Regulations.

Legal proceedings were instituted in three instances under Section 2 of the Food and Drugs Act, with results as under:-

- | | |
|------------------------------------|---|
| (a) Mouldy Cornish Pasties | Case dismissed. |
| (b) Unsound Bacon | Defendant fined £10
Costs awarded to the Council. |
| (c) Mouldy Steak and
Kidney Pie | Company and Manager fined £30
and £10 respectively. Costs
awarded to the Council and the
complainant's husband, £5. 5. -.
and £3. 3. -. respectively. |

FOOD PREMISESFood Hygiene Regulations, 1955

Number of inspections	1135
Number of notices served	74
Number of notices complied with	41

Premises registered under Section 16

For sale of ice cream:-

Grocers and provisions shops	29
Confectioners	27
Bakers' shops	10
Greengrocers	3
Fishmongers	3
Garages	3
Ice Cream Depot	2

For the manufacture of sausages,
preserved foods etc.:

Butchers	25
Grocers	7

Total	109
-------------	-----

Number of inspections	180
-----------------------------	-----

Number of food premises in the district

Grocers and provisions shops	64
Confectioners	29
Greengrocers	32
Butchers	31
Bakehouses	7
Bakers' Shops	16
Fishmongers	14
Cafes and Restaurants	27
Licensed premises	24
School canteens	29
Factory canteens	54
Nursing & Convalescent homes	3
Clubs, etc.	17
Total	347

FOOD & DRUGS ACT, 1955 (Continued)TABLE OF SAMPLES SUBMITTED FOR ANALYSIS

Article	Number examined			Number adulterated or otherwise irregular		
	Formal	Informal	Total	Formal	Informal	Total
Bacon	-	1	1	-	-	-
Milk	21	5	26	-	4	4
Butter	-	1	1	-	-	-
Ice Cream	1	-	1	-	-	-
Cheese Products	-	4	4	-	1	1
Confectionery	-	9	9	-	1	1
Jam	-	9	9	-	1	1
Fruit	-	5	5	-	2	2
Vegetables	-	4	4	-	1	1
Meat and Meat Products	-	11	11	-	3	3
Soup	-	1	1	-	1	1
Fish Products	-	4	4	-	-	-
Bread and Cakes	-	2	2	-	1	1
Vinegar, Sauces and Pickles	-	6	6	-	1	1
Tomato Paste and Puree	-	2	2	-	1	1
Barbecue Spice	-	1	1	-	-	-
Weetabix	-	1	1	-	1	1
Ravioli	-	2	2	-	-	-
Soft Drinks	4	9	13	4	2	6
Coffee	-	1	1	-	-	-
Drinking Chocolate	-	1	1	-	-	-
Whisky	3	-	3	-	-	-
TOTAL	29	79	108	4	20	24

The four "irregularities" in milk referred to the presence of very small amounts of foreign matter and informal action resulted in a prompt remedy.

The unsatisfactory samples of soft drinks resulted from the Vitamin C content of a particular brand being below that declared on the label, and the commodity concerned was withdrawn from sale.

Irregularities in other foodstuffs referred almost entirely to errors in labelling and all were dealt with satisfactorily by informal action.

FOOD & DRUGS ACT, 1955 (Continued)

The value of routine sampling is often queried, particularly as gross adulteration is nowadays rare, but there can be no doubt that constant checks act as valuable protection for consumers against unscrupulous traders. Moreover, with the increasing use of chemical additives, a careful watch needs to be kept for their unauthorised use.

MILKMilk and Dairies Regulations, 1949-54

Number of dairies registered
(distributing depots) 2

Milk Supply

Number of registered purveyors
of milk 45

Dealers' Licences

Tuberculin Tested 26
Pasteurised 40
Sterilised 19

Number of notices served under the
Regulations -
Number of notices complied with ... -

Milk Samples

Bacteriological examination of milk:

Designation	Samples Taken	Up to Standard	Below Standard (Failed Methylene Blue Test)
Tuberculin Tested	61	18	43
T.T. Pasteurised	24	24	-
Pasteurised	25	25	-
Sterilised	3	3	-
TOTAL	113	70	43

FOOD & DRUGS ACT, 1955 (Continued)

Experience has shown that raw milk fails to satisfy the methylene blue test far more frequently than does pasteurised milk. Although this test is primarily designed for determining keeping quality and as a guide to the general standards of the hygiene of production, it does also signify the greater risk of the spread of disease which accompanies the distribution of raw milk.

Thirty-seven of the 43 unsatisfactory samples originated from one supply from a farm outside this district which was being retailed, mainly in cartons, from five vending machines sited in the district. As samples taken on immediate entry into the district were also unsatisfactory, copies of all reports were sent to the Divisional Milk Officer of the Ministry of Agriculture.

The procedure for instituting legal proceedings in such instances is, however, slow and involved, and before proceedings were instituted by either the Ministry or this Council, the farmer concerned had sold his business. Subsequently, the vending machines were either converted for the sale of other commodities, discontinued altogether or used for the sale of pasteurised milk only by other distributors. Only one machine was in use for milk at the end of the year.

Biological examination of milk:

Designation	Samples Taken	Up to Standard	Below Standard
Tuberculin Tested	3	3	-

ICE-CREAM

No. of samples	Prov. Grade I	Prov. Grade II	Prov. Grade III	Prov. Grade IV
38	22	6	3	7

This year saw the introduction of "soft" ice-cream which brought with it an unsatisfactory series of sampling results. This method of marketing ice-cream demands a much high standard of precautions on the part of each individual machine-operator and the present legal control is considered grossly inadequate.

In August the Council informed the Urban District Councils Association of their concern and were notified that this Association had decided to make appropriate representations to the Ministry of Health.

UNFIT FOOD (Other than meat at slaughterhouse)

The following articles of food (excluding meat at the slaughterhouse) were examined during the year and certified as unfit for human consumption:-

192 Tins Meat	1 Packet Tea
333 Tins Fruit	½ lb. Butter
126 Tins Vegetables	88 lbs. Unsmoked Bacon
29 Tins Fish	219 lbs. Beef
22 Tins Milk	104 lbs. Pork
4 Tins Cream	20 lbs. Mutton
34 Tins Bolognaise	100 lbs. Offal
10 Tins Soup	6 lbs. Cooked Meat
19 Tins Milk Pudding	8½ " Sausage Meat
3 Tins Ravioli	2543 lbs. Poultry
18 Jars Preserves	6 lbs. Apples
2 Bottles Sauce	34 st. Fish
2 Jars Pickles	

Method and Disposal of Condemned Food

Meat and fish are stained and released, where appropriate, for by-product usage; otherwise the condemned food is buried on the Council's refuse tip.

SLAUGHTERHOUSES

The small private slaughterhouse which was licensed at the end of 1960 was used for the slaughter of horses only.

Number of horses killed 52

Condemnations:-

Livers 255 lbs.

Lungs 135 lbs.

TOTAL 390 lbs.

Unfit meat is sterilised in the processing plant attached to the adjacent knacker's yard.

KNACKERS' YARDS

Number of premises licensed 1

Number of inspections 8

The standards maintained at the knacker's yard have remained satisfactory, both as regards general sanitation and as regards the care of animals taken in.

Considerable attention has been given to the Meat (Staining and Sterilisation) Regulations, 1960, but it is still not possible to say whether they afford effective control over the sale of meat which is unfit for human consumption.

HOUSING

The main effort was again directed towards publicising the availability of Improvement Grants but, again, success was limited. Only 23 applications were received, and 19 grants were agreed in respect of 12 owner-occupied premises and 7 rented properties. Three applications were deferred pending a decision on the proposed area of comprehensive redevelopment in West Green.

The lack of substantial progress in this direction is frustrating, particularly in cases where tenants are anxious to secure the basic improvements entailed but owners are unwilling to carry them out.

The Housing Act, 1961 extended the amount of control exercisable over houses in multiple occupation. Although such properties are few in number locally, a considerable amount of time has to be spent in deciding the best course of action in each individual case. In some cases, too extensive action might result in landlords being obliged, or choosing, to evict tenants, which, in the absence of alternative accommodation, would be of no advantage.

Consideration was also given to the means of escape in case of fire from all known houses in multiple occupation which are not subject to Section 60 of the Public Health Act, 1936, but full action was not taken before the end of the year, pending consultation with the Fire Officer.

Inspection of dwelling-houses during the year:-

Total number of visits for housing defects under
Public Health and Housing Acts 608

Housing Act, 19571. Houses demolished in the period

- (a) Houses unfit for human habitation -
- (b) Houses included by reason of bad arrangement etc. -
- (c) Houses on land acquired under Sec. 43 -

Not in Clearance Areas

- (a) As a result of formal or informal procedure under
Sec. 16 or Sec. 17(1) 8

2. Houses closed in the period

(a) Under Secs. 16(4), 17(1) and 35(1)	1
(b) Under Secs. 17(3) and 26	-
(c) Parts of buildings closed under Sec. 18	-

3. Unfit houses in temporary use

(a) Retained for temporary accommodation

(1) Under Sec. 48	-
(2) Under Sec. 17(2)	-
(3) Under Sec. 46	-

(b) Licensed for temporary occupation under

Secs. 34 or 35	-
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4. Houses Let-in-Lodgings

(a) Formal notices served under Sec. 36	-
(b) Formal notices served under Sec. 90	-
(c) Formal notices complied with	-

5. Overcrowding - Part IV, Housing Act, 1957

(a) 1. Number of dwellings overcrowded at end of year...	-
2. Number of families dwelling therein	-
3. Number of persons dwelling therein	-

(b) Number of cases of overcrowding reported during the year	1
--	---

(c) Number of cases of overcrowding relieved during the year	1
--	---

(d) Number of formal notices to abate overcrowding	-
--	---

(e) Number of formal notices complied with	-
--	---

(f) Number of informal notices to abate overcrowding.....	-
---	---

(g) Number of informal notices complied with	-
--	---

6. Unfit houses made fit and houses in which defects were remedied

Unfit houses rendered fit and houses in which defects were remedied during the period as a result of informal action by the local authority under the Housing and Public Health Acts	24
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Unfit houses made fit and houses in which defects were remedied (Continued)

6. (a) After formal action under Public Health Act:

1. By owners	9
2. By local authority in default of owners...	-

(b) After formal action under Secs. 9 and 16,
Housing Act, 1957:

1. By owners	1
2. By local authority in default of owners...	-

(c) Under Sec. 24, Housing Act, 1957

Housing (Financial Provisions) Act, 1958
House Purchase and Housing Act, 1959

Number of discretionary improvement grants....	4
Number of standard improvement grants	15

Rent Act, 1957 - Certificates of Disrepair

Number of Form G. received	1
Number of Undertakings accepted	1
Number of Certificates issued	-
Number of Certificates cancelled	-
Number of undertakings complied with	1

These figures clearly indicate how little use is now being made by tenants of the provisions of this Act.

SECTION 60, PUBLIC HEALTH ACT, 1936 - Means of Escape from Fire in the case of Certain High Buildings

Number of inspections	26
-----------------------------	----

Number of notices served:-

Formal	1
Informal	5

Number of notices complied with:-

Formal	-
Informal	3

SECTION 60, PUBLIC HEALTH ACT, 1936 - Means of Escape from Fire
in the case of Certain High Buildings (Continued)

Considerable attention was again given to those buildings to which this section is applicable. In most cases the buildings have a single internal staircase, so the only practicable solution is to protect this staircase by making the doors opening thereon fire-resisting and self-closing. Such measures are by no means permanently infallible and continuing re-inspections are necessary to ensure that, in particular, door closers remain efficient. In buildings such as these, being subject as they are to frequent changes in occupation, no reliance can be placed on the occupants being aware of the required precautions.

The provision of an infallibly protected staircase with protected access is the obvious ideal but one which is seldom reasonably attainable other than in new buildings.

CLEAN AIR ACT, 1956

Smoke Control Areas

Two objections were received to a Smoke Control Order made in respect of the Southgate neighbourhood but, following a public inquiry held in May, the Minister confirmed the Order, the only variation being the advancement of the date of operation from 1st October, 1962, to 1st July, 1963.

A further Order in respect of the Ifield neighbourhood was submitted to the Minister in October, 1962. (No objections were received and the Order was confirmed in January, 1963).

Of the 5,622 acres of the district, 1,792 acres (Gossops Green and Tilgate) were subject to operative orders at the end of the year. 2,768 acres will be controlled by the 1st October, 1963.

Very little opposition to the Smoke Control programme has been encountered and a good many residents have welcomed the action being taken.

Industrial Plant

Most industrial plant continued to give little cause for concern, the main emissions again arising from those two on which waste wood is burned. Noteworthy co-operation has, however, always been forthcoming from the managements concerned and emissions are kept under control as far as such a difficult fuel - and financial aspects - will at present allow.

Industrial Plant (Continued)

Further complaints were received regarding the emission of smuts from a coal-fired boiler at a school and further remedial measures, including the possibility of heightening the chimney, were discussed with an officer of the County Council.

Further investigation was made into the emission of grit from the coal-fired boiler at a factory on the Industrial Estate and arrangements made for the taking of measurements of the flue dust burden in order to facilitate consideration of possible remedial measures.

NOISE ABATEMENT ACT, 1960

Number of infringements dealt with informally 2

Number of complaints being investigated

(no action yet taken) -

Complaints in respect of only two matters were received during the year, one from a resident concerning his neighbour's radio and the other referred to music emanating from a public house. In both cases the Council resolved to take no action themselves, but the complainants were advised as to other action which they themselves could take.

The small number of complaints may well be a result of the good planning possible in a New Town.

FACTORIES ACT, 1961

(1) Inspections for purposes of provision as to health.

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Secs. 1,2,3,4 & 6 are to be enforced by local authority	2	-	-	-
(ii) Factories not included in (i) in which Sec. 7 is enforced by local authority	171	93	3	-
(iii) Other premises in which Sec. 7 is enforced by local authority (exclud- ing outworkers' premises)	47	67	4	-
TOTAL	220	160	7	-

FACTORIES ACT, 1961 (Continued)

(2) Cases in which defects were found.

Particulars (1)	Number of cases in which defects were found				No. of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred		
			To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1)	-	-	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	-
Ineffective drainage of floors (S.6)	-	-	-	-	-
Sanitary Conveniences (S.7)					
(a) Insufficient	4	3	-	-	-
(b) Unsuitable or defective	3	3	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to outwork)	-	-	-	-	-
TOTAL	7	6	-	-	-

Outwork - Sections 133 and 134

Nature of work (1)	Section 110			Section 111		
	No. of out-workers in Aug. list required by S.110 (1)(c)(2) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecutions for failure to supply lists (4)	No. of instances of work in un-wholesome premises (5)	Notices served (6)	Prosecutions (7)
Wearing apparel (making)	28	-	-	-	-	-
Christmas crackers	2	-	-	-	-	-
Toys	58	-	-	-	-	-
TOTAL	88	-	-	-	-	-

HOME SAFETYHeating Appliances (Fireguards) Act, 1952Consumer Protection Act, 1961Fabrics (Misdescription) Act, 1913.Fabrics (Misdescription) Regulations, 1959

A general watch has been kept on the heating appliances being sold in the district. Most appliances now bear reference to the appropriate British Standard and it was not considered necessary to test any appliances.

No occasion arose for submitting fabrics for testing.

Oil Heaters Regulations, 1962.

These regulations came into force on 1st June, 1962. All oil heaters seen to be on sale in the district were noted to be bearing the appropriate British Standard Certification mark and it was not found necessary to submit any heaters for testing.

HOME SAFETY (Continued)Local Home Safety Committee

The Medical Officer of Health, my Deputy (Mr. Tyler to the 31st August, Mr. Faulkner from 17th October) and I continued to serve on the independent local Committee which was sponsored by the Council in 1960. Mr. Faulkner kindly volunteered to take over Mr. Tyler's duties as Organising Secretary.

The main task of such a Committee is to make people aware of the causes of home accidents and the ways of preventing them. Continuous propaganda is necessary.

PETROLEUM (CONSOLIDATION) ACT, 1928

Number of licences issued	67
Number of inspections	291
Number of disused installations made safe	3

Although the situation as regards licensable materials can be regarded as generally satisfactory, cases were still noted of comparable dangers arising in respect of non-licensable materials over which no control can be exercised. In conjunction with the County Fire Officers, however, advice was given as to precautions which could be taken.

SHOPS ACT, 1950

Total inspections for all purposes	71
--	----

PET ANIMALS ACT, 1951

Number of premises licensed	4
Number of inspections	9

COURSES OF INSTRUCTION ATTENDED

Deputy Chief Inspector - Weekend School, Public Health
Inspectors' Association

Deputy Chief Inspector - Three day Course for Public Health
Inspectors at Coal Utilisation
Council Vauxhall Training Centre.

Chief Public Health Inspector. - Course of lectures on Radio-Activity
at Crawley College of Further Education.
Deputy Chief Inspector
and both Additional
Inspectors.

APPENDIX A

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

1. Laboratory Facilities

Routine bacteriological work is carried out at the Brighton Public Health Laboratory. Routine samples of water, milk and ice-cream are submitted, together with many other types of specimens. Arrangements have been made for the despatch to the laboratory by the Public Health Department of any specimens which general practitioners may wish to send for examination. Details of the work carried out at the laboratory during the year are as follows:-

Faeces	...	...	758
Nose and throat swabs..			1
Faeces for virus studies			9
Food samples ..	...		34
Milks	...	...	106
Waters	...	...	35
Ice Creams	...	...	<u>38</u>

981

We are indebted to Dr. J.E. Jameson, the Director of the Laboratory, for his assistance and advice on many occasions.

2. Ambulance Service

The operation of this service, for which the West Sussex County Council as Local Health Authority is responsible, was carried out by the St. John Ambulance Brigade, the day-to-day administration being under the control of the local Divisional Superintendent.

Four ambulance vehicles were provided by the County Council and the staff increased to eight Driver/Attendants. During 1962 the Crawley ambulance fleet covered a total mileage of 75,681.

The Hospital Car Service, in the north-east corner of the County, was under the control of the transport officer at Horsham, serving the whole of this area. During 1962, these voluntary drivers covered 388,279 miles when transporting patients to hospitals and clinics.

3. Hospital Accommodation for Infectious Disease

The majority of cases of infectious disease in need of hospital treatment are normally admitted to Foredown I.D.H. at Hove, although the number sent in during 1962 was small. I must express my appreciation of the helpful co-operation of the Medical Superintendent.

We are advised that any cases of Smallpox occurring in the District should be sent to the River Hospital (Long Reach), Dartford, Kent.

4. Clinics and Treatment Centres

A. By Local Health Authority

The following is an account of the Services provided in the area by the West Sussex County Council as Local Health Authority.

(a) Nursing: The West Sussex County Council employs District Nurses, Midwives, Health Visitors and School Nurses. In Crawley the Health Visitors act as School Nurses, but District Nurses and Midwives operate separately.

(b) Maternity and Child Welfare: Infant Welfare Clinics are held as follows:-

Health Clinic, Exchange Road, Crawley. Sessions are held each Tuesday from 2 p.m., a doctor being in attendance.

Langley Green Clinic. Sessions are held each Wednesday from 2.30 p.m., a doctor being in attendance.

Jubilee Hall, Three Bridges. Sessions are held twice weekly (Monday and Thursday) from 2 p.m. A doctor is in attendance on the first, third and fifth Mondays and also on the second and fourth Thursdays in the month.

Bishop Bell Clinic, Tilgate. Sessions are held on Mondays and Fridays from 2 - 4 p.m., a doctor being in attendance on the second and fourth Monday, and also on the first, third and fifth Friday in the month.

Ifield Community Hut. Sessions are held weekly on Fridays from 2 - 4 p.m., a doctor being in attendance on the second and fourth Friday in the month.

Southgate Community Hut. Sessions are held each Thursday from 2 - 4 p.m., a doctor being in attendance on the third Thursday in the month.

Gossops Green Clinic (At Gossops Green School). Sessions are held twice weekly on Wednesdays from 10 a.m. and on Fridays from 2 - 4 p.m., a doctor being in attendance on Fridays.

Family Planning Clinic. A Family Planning Clinic is held at the Health Clinic in Exchange Road at 1.45 p.m. to 2.45 p.m. on Fridays and 7.15 p.m. to 8.15 p.m. on Mondays and on the first Thursday of each month.

Relaxation Classes.

Health Clinic, Exchange Road. Classes are held weekly on Mondays at 2 p.m.

(c) School Health Service. Regular inspections of children are carried out at all schools by the District M.O.H. and other School Medical Officers in the service of the County Council.

Two full-time Dental Surgeons operate in Crawley. Regular sessions are held at the Crawley Health Clinic, Langley Green and Tilgate Clinics, and in the medical rooms of the new schools.

Eye, Orthopaedic, Child Guidance, Physiotherapy and Speech Clinics are held in the town.

Sessions for immunisation against Diphtheria and Poliomyelitis are held at the Crawley Health Clinic, and at the Clinics in Three Bridges, Tilgate, Gossops Green and Langley Green.

(d) Home Help Service. This is controlled by the Women's Voluntary Service on behalf of the County Council. The value of this work cannot be over-estimated.

B. Other Facilities

(i) Hospital and Specialist Services. A comprehensive hospital and specialist service is provided by the Regional Hospital Board. Hospital accommodation of a private nature is available in certain circumstances, subject to appropriate charges.

(ii) General Medical and Dental Services. Everyone is entitled, as part of the arrangements of the National Health Service, to general medical and dental care. Local arrangements for these services are organised through the National Health Executive Council for West Sussex, 175, Broyle Road, Chichester.

(iii) Crawley Chest Clinic. As from June, 1961, Crawley patients who are referred to the Consultant Chest Physician are seen at the new Clinic in Crawley Hospital, where sessions are held on Wednesdays and Fridays.

(iv) Venereal Diseases. Patients may attend the Clinic at the Redhill County Hospital or at the Royal Sussex County Hospital, Brighton. Treatment is confidential and times are as follows:-

Redhill County Hospital

Men - Mondays 5 p.m. to 7 p.m.

Royal Sussex County Hospital

Men - Mondays 4.30 p.m. to 8.00 p.m.
Wednesdays 9.30 a.m. to 1 p.m.
Thursdays 1.30 p.m. to 4.30 p.m.

Women - Tuesdays 1.30 to 4.30 p.m.
Thursdays 10 a.m. to 1 p.m.
Saturdays 9.30 a.m. to 11.00 a.m.

Sessions for women are also held at the Croydon General Hospital on Tuesdays at 11 a.m. and Fridays at 5.30 p.m.

APPENDIX B

EXAMINATION OF WATER SUPPLIES AT SOURCE

In previous years this Appendix has included tables showing full details of bacteriological and chemical findings on samples taken by the North West Sussex Water Board at Weir Wood and Hardham, the figures having been provided by Mr. E.R. Griffiths, M.I.C.E., M.I.W.E., the Chief Engineer. Unfortunately, owing to staff changes in the Board's Laboratory, this information is not yet available for 1962.

During the year the main supply source to Crawley has been from Weir Wood, supplemented to a small extent by water from Hardham. Regular sampling continued, but did not reveal any noteworthy changes at either source. Repeated tests confirmed that the water is not plumbo-solvent.

The results of samples taken by the staff of the Public Health Department for bacteriological and chemical analysis, will be found on page 17 of this report.
